



**Notice of Appeal –
Commercial Motor Vehicle
Impoundment and
Suspension
Under s. 82.1 and s. 50.3 of the
Highway Traffic Act**

Important Information

- This appeal form applies only to appeals of a 15, 30 or 60 day impoundment and suspension under s. 82.1 of the *Highway Traffic Act*.
- You must complete all sections of this form and attach additional information and/or documents as required.
- The processing of your appeal could be delayed if information or documents are missing.
- There is a non-refundable fee of \$106 to file this appeal.
- You have the right to a representative. If you have a representative, have them complete the Tribunal's '[Declaration of Representative](#)' form and attach it to this form.

Name of Owner of Impounded Vehicle and Contact Information:

Last Name

First Name

Middle Initial

Company Operating Name (if applicable)

Numbered Company Name (if applicable)

Address: Street No. and Name, Unit No.

City

Province

Postal Code

Phone No.

Fax No.

Name of Operator of Impounded Vehicle and Contact Information:

Last Name

First Name

Middle Initial

Company Operating Name (if applicable)

Numbered Company Name (if applicable)

Address: Street No. and Name, Unit No.

City

Province

Postal Code

Phone No.

Fax No.

Impounded Vehicle Information:

Vehicle Identification Number (VIN)

Year

Make

Model

Commercial Vehicle Operator's Registration Number of Impounded Vehicle

Plate Number

Incident Information:

Name of Impoundment Facility

Address

Impoundment Order Number

Date Impoundment Order was issued (dd/mm/yyyy)

Number of days vehicle is ordered to be impounded (select one):

15 days

30 days

60 days

Will you be applying to the Superior Court of Justice for an order directing the Registrar to release the vehicle and reinstate the vehicle portion of its permit as allowed by s.82.1 (21) of the *Highway Traffic Act*?

Yes No

Appeal Ground (you must select one of the grounds below):

- The impounded commercial motor vehicle or trailer s impounded was stolen at the time the vehicle was detained under Section 82.1.
- The impounded commercial motor vehicle or trailer had no critical defects at the time of the inspection under Section 82.1.

I am filing my appeal within the deadline indicated on the order.

- Yes
- No

Reasons You are Making this Appeal:

Describe in detail the points of the order that you disagree with **and** provide details explaining why you disagree with those points. (Attach additional pages if you need more space.)

Stolen Vehicle or Trailer: Please provide the facts about the stolen vehicle or trailer. For example, was the vehicle reported stolen to the Police? When did you have last knowledge of the whereabouts of your vehicle? Do you have any documents, information or evidence about the theft?

No Critical Defects on Vehicle or Trailer: Please provide the facts respecting the alleged critical defect(s). For example, what are the facts in dispute? Do you have any documents or evidence that dispute the critical defect(s)?

Acknowledgement - Read carefully then check each box to confirm the statement and sign and date the form.

- I have completed all pages of this form and attached all the required documentation. I understand that if I submit an incomplete form or do not attach required documents, my appeal may not be processed.
- I have completed the 'Payment Information' section on page 4 of this form and am submitting payment for my appeal in an acceptable format.

Print Name

Signature

Date (yyyy/mm/dd)

This page is not part of your disclosure to the other parties. **Submit this page to the Tribunal only.**

Payment Information:

- Payment of \$106 must be submitted with this form in one of the acceptable formats below.
- The filing fee is per licence. If you are filing an appeal about more than one licence, ensure you have submitted payment for each one.
- Money Orders, Bank Drafts and Certified Cheques must be made payable to the Minister of Finance.

Acceptable Methods of Payment:

| If you are filing your appeal ... | You must pay by ... |
|-----------------------------------|--|
| by fax | credit card |
| by mail or courier | credit card, certified cheque, money order, bank draft |

I am paying my \$106 filing fee by:

- Certified Cheque Money Order Bank Draft Credit Card*

* If you are paying by credit card, you must provide the following information:

- MasterCard Visa

Expiry Date (mm/yyyy)

Credit Card Number

Cardholder Name (as it appears on card)

Signature

The information you provide on this sheet is confidential. It will be used to process your application, but will not be placed on your file.

For Licence Appeal Tribunal Office Use Only:

LAT File No. _____

Date Appeal and Fee Processed _____

The Licence Appeal Tribunal collects the personal information requested on this form under section 3 of the *Licence Appeal Tribunal Act, 1999*. This information will be used to determine appeals under this Act. After an appeal is filed, all information may become available to the public. Any questions about this collection may be directed to the Licence Appeal Tribunal at 416-326-1356 or toll-free at 1-888-444-0240.